	PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number					
	Effective December 8, 2004									10/	bb:	21	3 G		
I	CLAIMS AS FILED - PART I							SMA	II E	mr					
	TOTAL CLA	MMS	(C	(Column 1) (Column 1)			TYPE			OR OR			SMALI	R THAN L ENTITY	
	FOR			MOCD CU CD	-		4	RATE		FEE			RATE	FEE	
	TOTAL CHARGEABLE CLAIMS			NUMBER FILED		NUMBER EXTRA		BASIC		150.0	50.00 OI		ASIC FE	E 300.00	
	NDEPENDEN			minus 20= minus 3 =	*		-	X\$	(\$ 25=			OR .	X\$50=		
Ī	MULTIPLE DEPENDENT CLAIM PR					X100				OR		X200=			
•	If the differe	nce in column	1 is lose th	ess than zero, enter "0" in column 2			ļ	+180=			OR		-360=		
								TOTAL				OR TOTA		-	
_	7	(Column	AIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL									OTHER	THAN		
A		CLAIMS REMAININ	G :	HIGHE	ST		-1 · r	-		ADDI-	7	الم	MALL	ENTITY	
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AFINE	Total Independen	* .	Minus Minus	**		=		X\$ 25			OF	X X	\$50=		
₹	FIRST PRESENTATION OF MU			1		184 [77]		X100	=			X	200≈		
	/ /				CAIIVI			+180=	OR +360=			60-			
	9/15/26						L .	TOTA		-		L	IOTAL		
	7 10101	(Column 1)		(Column		 (Column 3)	~	OH. 12	:		, •	ADDI	T. FEE L		
		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS	l LY	PRESENT EXTRA		RATE		DI-		RA		ADDI-	
	Total	* 7	Minus	PAID FOR		= -	-		F	EE		1724		TONAL FEE	
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Γ		CLAIMS REMAINING	T	(Column 2 HIGHEST		Column 3)									
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the	entry in colum	In 1 is less than the	entry in colu	mn 2, write "0" in a	Min.	3	+18			OF	3	+360=	=]		
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	· names ianuig	er Previously Pald	For (Total or	Independent) is the	ie higi	rest number fou	nd in U	ne appr	opriate	box in c	colum	n 1.			
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